

No patent right can be granted for plants as such or parts of the plants because these are available in nature.

Pak Prime Minister's Statement on Kashmir

1264. SHRI JAGMOHAN : Will the Minister of EXTERNAL AFFAIRS be pleased to state :

(a) whether Government's attention has been drawn to Mrs. Benazir Bhutto's recent address to the nation in which she has, inter alia, expressed her resolve to give whole hearted support to Kashmiri Muslims in their struggle for right of self-determination; and

(b) if so, the details thereof and the reaction of the Government thereto?

THE MINISTER OF EXTERNAL AFFAIRS (SHRI I.K. GUJRAL) : (a) Yes, Sir.

(b) The tone of Pakistan Prime Minister's address to the nation on 28 June, 1996 was at variance with the letter of felicitations sent by her to our Prime Minister at his assumption of office. In his reply to the Prime Minister of Pakistan, our Prime Minister suggested the resumption of the Foreign Secretary level dialogue. We await Pakistan's response to our Prime Minister's letter to the Pakistani Prime Minister.

Closure of Jammu-Srinagar Highway

1265. SHRI CHAMAN LAL GUPTA : Will the Minister of SURFACE TRANSPORT be pleased to state:

(a) the number of days Jammu-Srinagar Highway remained closed for traffic during 1995 and from January to June 1996 with main reasons therefor;

(b) the expenditure incurred on repair works on the Jammu-Srinagar highway during 1993-94, 1994-95 and 1995-96; and

(c) whether the conditions of the highway is getting deteriorated and the steps being taken to make the highway motorable?

THE MINISTER OF SURFACE TRANSPORT (SHRI T.G. VENKATRAMAN) : (a) The Jammu-Srinagar highway remained closed for 41 days during 1995 and 9 days during January, 1996 to June, 1996 due to heavy rainfall and snowfall.

(b) The expenditure incurred on repairs works, on the Jammu-Srinagar highway, during the years 1993-94, 1994-95 and 1995-96 was Rs. 413 lakhs, Rs. 511 lakhs and Rs. 516 lakhs respectively.

(c) No, Sir.

Even though the existing availability of funds for improvement/maintenance is quite meagre, yet persistent efforts are on to maintain the highway in motorable condition.

[Translation]

Central Government Health Scheme

1266. SHRI BHIM PRASAD DAHAL : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether all the Central Government Health Scheme dispensaries are having their own laboratories for blood/sputum/stool/urin testing;

(b) is not, the reasons therefor;

(c) whether the Government have any scheme to provide the said facility in all the dispensaries; and

(d) if so, the details thereof and the time by which the above said facilities are likely to be made available?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) : (a) No, Sir.

(b) to (d). It is not feasible to provide laboratory facilities in each dispensary due to financial constraints. However, all CGHS dispensaries have been covered for laboratory facilities by attaching two/three of the nearest dispensaries to the dispensaries which have the laboratory facilities.

[English]

Implementation of Major Projects

1267. SHRI CHITTA BASU : Will the Minister of WATER RESOURCES be pleased to state :

(a) whether it is a fact that a large number of villagers have been ousted from their native villages as a result of the implementation of major projects like Subarnarekha Multipurpose project and the Koel-Karo Project;

(b) if so, the details thereof; and

(c) the steps taken for their rehabilitation?

THE MINISTER OF WATER RESOURCES (SHRI JANESHWAR MISHRA) : (a) Yes, Sir.

(b) The total number of people affected by Subarnarekha Multipurpose Project and Koel Karo Project is given below :

I. Subarnarekha Multipurpose Project		
1.	Chandil Dam (Bihar)	37596 No.
2.	Icha Dam	
(i)	Bihar Portion	126160 No.
(ii)	Orissa Portion	9653 No.
3.	Haladia Dam	1629 No.
4.	Jambhira Dam	6672 No.
5.	Baura Dam	5474 No.
II.	Koel Karo Project	22359 No.

(c) The steps taken for rehabilitation in respect of Subernarekha Multipurpose Project & Koel Karo Project are given below :

I. *Subernarekha Projects* : According to the latest policy of Bihar Government, a grant of Rs. 55,000 per displaced family is being given which includes grants for house building, economic rehabilitation, shifting charges and 25 decimals of homestead. In addition payment is made to compensate for houses and lands acquired in the submergence area.

According to Orissa Rehabilitation Policy Act, 1994 a displaced family is being given assistance of Rs. 64,000 for purchase of house plots, construction of house and purchase of cultivable land. Besides this a rehabilitation assistance of Rs. 500/- per month is given for one year from the date of displacement.

II. *Koel Karo Project* : The rehabilitation package for the project consists of :-

- (i) Employment to one member from every family whose land is being acquired to be provided in the ratio of 75:25 by the Government of Bihar and in the project respectively.
- (ii) Compensation for the acquired land to be fixed by capitalising price of 15 years yield from the land.
- (iii) 25 decimal land free of cost to every oustee for construction of house at rehabilitation site.
- (iv) Rs. 750/- as transport grant for transportation of personal effects to each displaced family.
- (v) Rs. 500/- to Rs. 1000/- as grant-in-aid to each family whose land would be acquired depending on the amount of compensation in addition to the compensation amount of the land acquired.
- (vi) Shops at market complex constructed in colonies/construction sites would be reserved for displaced persons.
- (vii) Contracts for Earthwork and stone cutting and contracts upto estimated value of Rs. 10 lakh for affected persons on the basis of competitive bidding among them. The affected persons would not require to deposit earnest money and security deposit.
- (viii) Religious places would be constructed at the rehabilitation site in lieu of those which may be submerged.
- (ix) All civil amenities, cultural activities for tribals, technical/vocational courses for displaced families etc.

Birth Centenary of Netaji

1268. SHRIMATI KRISHNA BOSE : Will the Minister of HUMAN RESOURCE DEVELOPMENT be pleased to state :

(a) whether Government will be convening a

meeting of the National Committee on an urgent basis in view of the birth centenary of Netaji Subhash Chandra Bose which is only six months away; and

(b) if so, the probable date of the meeting of the National Committee constituted for this purpose?

THE MINISTER OF HUMAN RESOURCE DEVELOPMENT (SHRI S.R. BOMMALI) : (a) and (b). The Government is conscious of the urgency that needs to be accorded to the finalisation of the programmes/activities to commemorate the Birth Centenary of Netaji Subhash Chandra Bose. All necessary steps are being taken in this direction and the question of fixing the next date for the meeting of the National Committee is also under consideration.

Kala-Azar

1269. DR. M.P. JAISWAL : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state :

(a) whether there is large scale incident of Kala-Azar in Bihar;

(b) if so, the reasons therefor;

(c) whether the Government have stopped spraying of D.D.T. in the endemic areas;

(d) if so, reasons therefor;

(e) the details of assistance provided to the State during 1995-96; and

(f) the steps taken to effectively control Kala-Azar in Bihar?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) : (a) and (b). There has been an increase in the incidence of Kala-Azar in Bihar over the period January - May, 1996 as compared to same period last year. The increase can be attributed to non-spraying of DDT as per the schedule and inadequacy of active house-to-house detection and treatment of cases.

(c) No, Sir.

(d) Question does not arise.

(e) During the year 1995-96, 99,200 vials of Sodium Stibo Gluconate (SSG) and 10,000 vials of Pentamidine which constitute essential drugs for treatment of Kala-azar were supplied by the Central Government to the Govt. of Bihar.

(f) steps taken to control the disease are :-

- interruption of transmission through vector control by undertaking residual insecticidal spraying in affected areas.
- Early diagnosis and complete treatment through Primary Health Care System.
- Health Education and Community participation.